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Bib Data Sheet

CONFIRMATION NO. 9785

SERIAL NUMBER 10/646,643	FILING DATE 08/22/2003 RULE	CLASS 108	GROUP ART UNIT 3637	ATTORNEY DOCKET NO. 2003P07970 US
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APPLICANTS

George William Dailey, Glen Ellyn, IL;

** CONTINUING DATA *****

None *tna*

** FOREIGN APPLICATIONS *****

None *tna*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/15/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	STATE OR COUNTRY IL	SHEETS DRAWING 2	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
Verified and Acknowledged	<i>tna</i> Examiner's Signature <i>tna</i> Initials				

ADDRESS

Elsa Keller
 Siemens Corporation
 Intellectual Property Department
 170 Wood Avenue South
 Iselin, NJ
 08830

TITLE

Multiple position support structure

FILING FEE RECEIVED 1014	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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